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Ex of Time  
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<b>PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. § 1.136(a)</b>		Atty. Docket No. 88-01C2D1C1RE																													
Inventor(s): SANDERS																															
Appln. No.: 09/473,196		Conf. No.: 9700																													
Filed: December 13, 1999																															
Title: Pressure Application Method																															
Examiner: Isabella, D.		Group Art Unit: 3738																													
Express Mail Label No. (if applicable): EV 196252054 US																															
<p>This is a request under the provisions of 37 C.F.R. § 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee from the original due date of <u>February 18, 2003</u> are as follows:</p> <p>(check time period desired)</p> <table><tr><td><input type="checkbox"/></td><td>One month - 37 C.F.R. § 1.17(a)(1)</td><td>\$</td><td>_____</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Two months - 37 C.F.R. § 1.17(a)(2)</td><td>\$</td><td>410.00</td></tr><tr><td><input type="checkbox"/></td><td>Three months - 37 C.F.R. § 1.17(a)(3)</td><td>\$</td><td>_____</td></tr><tr><td><input type="checkbox"/></td><td>Four months - 37 C.F.R. § 1.17(a)(4)</td><td>\$</td><td>_____</td></tr><tr><td><input type="checkbox"/></td><td>Five months - 37 C.F.R. § 1.17(a)(5)</td><td>\$</td><td>_____</td></tr></table> <p>Less the previous extension fee of \$ _____ paid in papers dated _____, which were filed in the present application subsequent to the original due date.</p> <table><tr><td><input checked="" type="checkbox"/></td><td>Fee Transmittal Form Attached. (Submit original and a duplicate for fee processing)</td></tr><tr><td><input type="checkbox"/></td><td>A check covering the amount due of \$ _____ is enclosed (check no. _____).</td></tr><tr><td><input checked="" type="checkbox"/></td><td>The Commissioner has already been authorized to charge fees in this application to Deposit Account No. 50-0558.</td></tr><tr><td><input type="checkbox"/></td><td>The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0558. A duplicate copy of this sheet is enclosed.</td></tr></table> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input checked="" type="checkbox"/> attorney or agent acting under 37 C.F.R. § 1.34(a), Registration No. 35,174</p> <p>April 18, 2003 _____ Date</p> <p>_____ Signature</p> <p>Michael W. Haas Typed Name</p>				<input type="checkbox"/>	One month - 37 C.F.R. § 1.17(a)(1)	\$	_____	<input checked="" type="checkbox"/>	Two months - 37 C.F.R. § 1.17(a)(2)	\$	410.00	<input type="checkbox"/>	Three months - 37 C.F.R. § 1.17(a)(3)	\$	_____	<input type="checkbox"/>	Four months - 37 C.F.R. § 1.17(a)(4)	\$	_____	<input type="checkbox"/>	Five months - 37 C.F.R. § 1.17(a)(5)	\$	_____	<input checked="" type="checkbox"/>	Fee Transmittal Form Attached. (Submit original and a duplicate for fee processing)	<input type="checkbox"/>	A check covering the amount due of \$ _____ is enclosed (check no. _____).	<input checked="" type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to Deposit Account No. 50-0558.	<input type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0558. A duplicate copy of this sheet is enclosed.
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